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Application Number 09/407,327						
Filing Date	Date September 28, 1999					
First Named Inventor	Dr. George H. LOWELL					
Group Art Unit	1645					
Examiner Name	R. Zeman					
Attorney Docket Number	406462000102					

Total Number of Pa	ages in This Submission	20	Attorney Docket Numb	per 406462000102					
ENCLOSURES (check all that apply)									
X Fee Transmittal	Form	Assignment I	•	After Allowance Communication to Group					
Fee Attach	hed	Drawing(s)		Appeal Communication to Board of Appeals and Interferences					
x Amendment/Rep	ply	Licensing-rel	ated Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)					
After Final	·	Petition		Proprietary Information					
Affidavits/d	declaration(s)	Petition to Co Application	onvert to a Provisional	Status Letter					
X Extension of Time	ne Request		rney, Revocation rrespondence Address	X Other Enclosure(s) (please identify below)					
Express Abando	onment Request	Terminal Dis	claimer	Postcard					
X Information Disc	dosure Statement	Request for	Refund	MECEIVER					
Certified Copy of Document(s)	f Priority	CD, Number	of CD(s)	Postcard RECEIVED JUN 0 5 2003 TECH CENTER 1600/2900					
Response to Mis		emarks		SON CENTER 1800's					
	to Missing Parts CFR 1.52 or 1.53			00/2900					
				•					
	SIGNATUR	E OF APPLICA	ANT, ATTORNEY, OR A	AGENT					
MORRISON & FOERSTER LLP or Individual Name MORRISON & FOERSTER LLP Karen B. Dow - 29,684									
Signature /	aren Baby	aK J	Dows						
	ay 30, 2003								

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Dated: May 30,2003 Signature: Thomas Durant (Nora Durant)
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CCC TO A MODALTTAL					Com	plete if Known		
FEE TRANSMITTAL		Applic	cation	Numb	er	09/407,327		
for FY 2003		Filing	Date			September 28, 1999		
Patent fees are subject to annual revision.		First I	Named	Inver	ntor	George H. LOWELL		
r atent 1903 are subject to annual revision.		Exam	iner Na	ame		R. Zeman		
Applicant claims small entity status. See 37 CFR 1.27		Groun	Art U	nit		1645	PECE / 200 0 5 20 CENTER 600	
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Deposit Account Morrison & Foerster LLP	1051	130	2051	65	Surcharg	e – late filing fee or oath		
Name	1052	50	2052	25		e – late provisional filing fee or cove	er	
The Commissioner is hereby authorized to: (check all that apply)					sheet.			
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-Engl	lish specification		
Charge any additional fee(s) during the pendency of this application	1812	2,520	1812	2,520	_	a request for ex parte reexamination		
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920*	Requesti Examiner	ng publication of SIR prior to raction		
to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesti	ng publication of SIR after		
FEE CALCULATION	1251	110	2251	55	Examine	r action n for reply within first month	110.00	
1. BASIC FILING FEE	1252	410	2252	205		n for reply within second month		
Large Entity Small Entity	1253	930	2253	465	Extension	for reply within third month	1	
Fee Fee Fee Fee Fee Description	1254	1,450	2254	725	Extension	for reply within fourth month	1	
Code (\$) Code (\$) Fee Paid 1001 750 2001 375 Utility filing fee	1255	1,970	2255	985	Extension	for reply within fifth month		
1002 330 2002 165 Design filing fee	1401	320	2401	160	Notice of	Appeal		
1003 520 2003 260 Plant filing fee	1402	320	2402	160	Filing a b	rief in support of an appeal		
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Request	for oral hearing		
1005 160 2005 80 Provisional filing fee	1451	1,510	1451			institute a public use proceeding		
SUBTOTAL (1) (\$) 0.00	1452	110	2452	55		o revive – unavoidable		
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1501	1,300	2501	650	-	ue fee (or reissue)	 	
Claims below Fee Paid	1502	470 630	2502 2503	235	Design is		 	
Total Claims 26 -27 = 0 x = 0	1503 1460	130	1460	315 130	Plant issu	to the Commissioner		
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Code (\$) Fee Description	8021	40	8021	40	property ((times number of properties)		
1202 18 2202 9 Claims in excess of 20	1809	750	2809	375	Filing a s (37 CFR	ubmission after final rejection 1.129(a))		
1201 84 2201 42 Independent claims in excess of 3	1810	750	2810	375	For each	additional invention to be		
1203 280 2203 140 Multiple dependent claim, if not paid 1204 84 2204 42 *7 Reissue independent claims	1801	750	2801	375		f (37CFR 1.129(b)) for Continued Examination (RCE)	├ ─┤I	
over original patent	1802	900	1802	900	•	for expedited examination		
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SUBTOTAL (2) (\$) 0.00 **or number previously paid, if greater; For Reissues, see above	*Redu	uced by I	Basic Fi	ling Fee	Paid	SUBTOTAL (3) (\$)	290.00	
						Complete (if continue to)		
SUBMITTED BY	Reaist	ration No	2	CC 4		Complete (if applicable) Telephone (858) 720-796		
Name (Print/Type) Karen B. Dow	1/4/		: 129	.684		relephone (858) /20-/96	U I	

SUBMITTED BY					Complete (if applicable)
Name (Print/Type)	Karen B. Dow		Registration No (Attorney/Agent		Telephone	(858) 720-7960
Signature	Karen	Babua	K	Sows	Date	May 30, 2003

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Dated: May 30, 2003

Signature: _/ (Nora Durant)